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Bib Data Sheet

CONFIRMATION NO. 3615

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|-----------------------------|-----------------------------------|--------------|------------------------|--------------------------------------|
| SERIAL NUMBER 10/802,289 | FILING DATE 03/17/2004 RULE | CLASS 005 | GROUP ART UNIT 3673 | ATTORNEY DOCKET NO. 7175-74605 |
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APPLICANTS

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** CONTINUING DATA *****

This appln claims benefit of 60/455,621 03/18/2003
 and claims benefit of 60/510,756 10/13/2003

O.K. R.S.

** FOREIGN APPLICATIONS *****

none R.S.

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 06/03/2004

| Foreign Priority claimed | <input type="checkbox"/> yes <input checked="" type="checkbox"/> no | STATE OR COUNTRY IN | SHEETS DRAWING 8 | TOTAL CLAIMS 29 | INDEPENDENT CLAIMS 6 |
|---------------------------------|---|---------------------------|------------------------|-----------------------|----------------------------|
| 35 USC 119 (a-d) conditions met | <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance | | | | |
| Verified and Acknowledged | <i>Robert L. S. R.C.S.</i> Examiner's Signature Initials | | | | |

ADDRESS

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TITLE

Patient care equipment management system

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|---|
| <input type="checkbox"/> All Fees |
| <input type="checkbox"/> 1.16 Fees (Filing) |
| <input type="checkbox"/> 1.17 Fees (Processing Ext. of |

FILING FEE FEES: Authority has been given in Paper

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